Department of Labor and Industries WISHA Services Division



SAFETY MEETING MINUTES

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1-800-4BE-SAFE The record for this safety meeting must be kept for one year. Page 1 of 2 Employer Worksite location Meeting date: Meeting start time: Meeting end time: Attendance (M)anagement (E)mployee M M \mathbf{E} \mathbf{E} Examples: \mathbf{M} M John Smith M Mary Brown E E \mathbf{E} M M M \mathbf{E} E \mathbf{E} M M M E E \mathbf{E} \mathbf{M} M E \mathbf{E} E Agenda: for corrections/approval Review minutes of our previous meeting dated Progress report on last meeting's "To Do" list: Discuss hazards, concerns, self-inspections, other inspections, etc., since our last meeting.



SAFETY MEETING MINUTES

The record for this safety meeting must be kept for one year.					Page 2 of 2
Review accident/near miss reports to determine if causes were identified and corrected					
Meeting date:		Meeting start time:		Meeting end time:	
Suggested updates to our Accident Prevention Program					
Other					
Other					
To Do List:		Assigned to:		Du	e:
Minutes written by			Meeting leader (signature)		
Date next meeting	Start time	Location			
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Additional attenda	ance, members absent, gue	sts (from front) or other notes	S:		